



**BID NO.: 6879-0/18**

**INITIAL OPENING: 2:00 P.M.  
Wednesday  
August 7, 2013**

**MIAMI-DADE COUNTY, FLORIDA**  
**R E Q U E S T   T O   Q U A L I F Y**

**TITLE:**  
**Lawn Equipment, OEM Replacement Parts and Repair  
Services, RTQ**

**FOR INFORMATION CONTACT:**  
**Lina Bonilla, 305-375-2173, lbonill@miamidade.gov**

**IMPORTANT NOTICE TO SUBMITTERS:**

- **READ THIS ENTIRE DOCUMENT, THE GENERAL TERMS AND CONDITIONS, AND HANDLE ALL QUESTIONS IN ACCORDANCE WITH THE TERMS OUTLINED IN PARAGRAPH 1.2(D) OF THE GENERAL TERMS AND CONDITIONS.**

**MIAMI-DADE COUNTY  
INTERNAL SERVICES DEPARTMENT  
PROCUREMENT MANAGEMENT DIVISION**



**MIAMI-DADE COUNTY, FLORIDA**

**REQUEST TO QUALIFY**

**Bid Number: 6879-0/18**

**Bid Title:** Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ

**Procurement Officer: Lina Bonilla, CPPB**

**Submittals will be accepted until 2:00 p.m. on Wednesday, August 7, 2013**

**Submittals will be publicly opened.** The County provides equal access and does not discriminate on the basis of disability in its programs or services. It is our policy to make all communication available to the public, including those who may be visually or hearing impaired. If you require information in a non-traditional format please call 305-375-5278.

**Instructions:** The Clerk of the Board business hours are 8:00am to 4:30pm, Monday through Friday. Additionally, the Clerk of the Board is closed on holidays observed by the County. Each Bid submitted to the Clerk of the Board shall have the following information clearly marked on the face of the envelope: the Submitters name, return address, Bid number, opening date of the Request to Qualify and the title of the Request to Qualify. Included in the envelope shall be an original and two copies of the Submittal, plus attachments if applicable.

All Submittals received will be time and date stamped by the Clerk of the Board prior to the Submittal deadline shall be accepted as timely submitted. The circumstances surrounding all Submittals received and time stamped by the Clerk of the Board after the Submittal deadline will be evaluated by the procuring department, in consultation with the County Attorney's Office, to determine whether the Submittal will be accepted as timely.

**NOTICE TO ALL SUBMITTERS:**

- **THE SUBMITTAL FORM CONTAINS IMPORTANT CERTIFICATIONS THAT REQUIRE REVIEW AND COMPLETION BY ANY SUBMITTER RESPONDING TO THIS REQUEST TO QUALIFY.**

**MIAMI-DADE COUNTY  
INTERNAL SERVICES DEPARTMENT  
PROCUREMENT MANAGEMENT DIVISION**

**SECTION 1**  
**GENERAL TERMS AND CONDITIONS**

**Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ**

All general terms and conditions of Miami-Dade County Procurement Contracts for Invitations to Bid are posted online. Persons and Companies that receive an award from Miami-Dade County through Miami-Dade County's competitive procurement process must anticipate the inclusion of these requirements in the resultant Contract. These standard general terms and conditions are considered non-negotiable subject to the County's final approval.

All applicable terms and conditions pertaining to this solicitation and resultant contract may be viewed online at the Miami-Dade County Procurement Management website by clicking on the below link:

<http://www.miamidade.gov/procurement/library/boilerplate/general-terms-and-conditions-r13-4.pdf>

**SECTION 2**  
**SPECIAL CONDITIONS**

**Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ**

**2.1 PURPOSE**

This Request to Qualify (RTQ) will establish a pool of Vendors capable of providing Lawn equipment, original equipment manufacturer (OEM) replacement parts and repair services. Entry into the Pre-Qualification Pool is not a contract between Miami-Dade County and any Vendor, but an acknowledgement that included Vendors meet the qualifications as outline throughout this RTQ. Pre-qualified Vendors will be invited to participate in future competitions. The pool shall be open for Submitters to qualify at any time after the initial RTQ opening date.

**2.2 TERM**

The pre-qualification pool will begin on the first calendar day of the month succeeding approval by the Board of County Commissioners, or designee, unless otherwise stipulated in the Notice of Award Letter which is distributed by the County's Department of Internal Services, Procurement Management Services, and contingent upon the completion and submittal of all required Submittal documents. The Pre-Qualification Pool shall expire on the last day of the last month of the **five-year period**.

**2.3 MEASURES**

Measures do not apply to federally funded purchases.

**2.4 QUALIFICATION CRITERIA**

**Group 1: Lawn Equipment / OEM Replacements Parts**

Submitters who meet the following minimum qualifications will be placed on a list for purchase of **lawn equipment and / or OEM replacement parts**. Pre-qualified Vendors will be invited to participate in subsequent Request for Quotations (RFQ).

**Minimum Qualifications**

1. Submitters shall provide a list of no less than three client references who can confirm that the Submitter has successfully provided lawn equipment and / or OEM replacement parts. The following information shall be provided: company name, contact person, telephone number and e-mail address.
2. Submitters shall submit proof they or their supplier can provide lawn equipment and / or OEM replacement parts to meet the needs of Miami-Dade County. The proof may be in the form of current correspondence from the manufacturer; or a copy of the signed agreement between the manufacturer and the Submitter, a reseller agreement; or a reference on the manufacturer's website, where the manufacturer clearly lists the Submitter as an authorized agent, dealer, representative, distributor or reseller of the manufacturer lines / brands submitted for approval.

**Group 2: Repair Services for Equipment Out of Warranty**

Submitters who meet the following minimum qualifications will be placed on a list for repairs. Pre-qualified Vendors will be invited to participate in subsequent RFQ.

**Minimum Qualifications**

**SECTION 2**  
**SPECIAL CONDITIONS**

**Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ**

1. Submitters shall provide a list of no less than three client references who can confirm that the Submitter has successfully provided repair services to lawn equipment for no less than 1 year. The following information shall be provided: company name, contact person, telephone number and e-mail address.
2. Submitters shall submit proof they or their supplier can supply OEM replacement parts that will be used during the repair service.

It shall be the sole prerogative of the County as to the number of Vendors who will be included under Groups 1 and 2. During the term of this contract, the County reserves the right to add or delete Vendors as it deems necessary and in its best interests. Any Vendor being added to these groups must meet the same minimum qualifications established herein.

**2.5 CONTACT PERSON**

For any additional information regarding the terms and conditions of this RTQ contact Lina Bonilla at 305-375-2173 or [lbonill@miamidade.gov](mailto:lbonill@miamidade.gov).

**2.6 DELIVERY**

All deliveries shall be completed in accordance with good commercial practice and shall be adhered to, by the Vendor(s); except in such cases, where the delivery will be delayed due to acts of nature, strikes, or other causes beyond the control of the Vendors. In these cases, the Vendor(s) shall notify the County of the delays in advance so that a revised schedule can be appropriately considered by the County.

Should the Vendor(s) to whom an order is awarded fail to deliver in the number of days established in the **Request for Quote / Work Order / Purchase Order** the County reserves the right to cancel the order on a default basis. If the order is so terminated, it is hereby understood and agreed that the County has the authority to purchase the goods and/or services elsewhere and to charge the Successful Vendor with any re-procurement costs by invoicing the Vendor or offsetting the costs associated with re-procurement from amounts due to the Vendor by the County.

**A. PACKING SLIP / DELIVERY TICKET**

The Vendors shall enclose a complete **packing slip / delivery ticket** with new equipment, replacement part and repaired equipment to be delivered. The **packing slip / delivery ticket** shall be attached to the equipment and / or part and shall be made available to the user department during delivery. The **packing slip / delivery ticket** shall include, at a minimum, the following information: **Request for Quote / Work Order / Purchase Order** number; date of order; a complete listing of items being delivered; and back-order quantities and estimated delivery of back-orders if applicable.

**B. AUTHORIZATION TO PICK-UP**

Certain authorized Miami-Dade County employees shall be able to pick-up equipment, and/or replacement parts from the Vendor's facility. Such authorization is provided for the County employee through an "Authorization to Pick-up Materials" who shall surrender the form to the Vendor during each pick-up. If the Vendor is in doubt about the authenticity of

**SECTION 2**  
**SPECIAL CONDITIONS**

**Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ**

the person picking up the materials, the Vendor shall contact the County department for assistance.

**2.7 NOTIFICATION TO BEGIN REPAIRS**

Vendors shall not commence any repairs until a **Work Order** or **Purchase Order** directing the Vendors to proceed with the work assignment has been received from an authorized County representative. All repairs must be completed and returned to the user department within the number of days identified in the **Request for Quote / Work Order / Purchase Order**.

**2.8 WORK ACCEPTANCE**

The repaired equipment shall be delivered to the County in the conditions specified in the **Request for Quote / Work Order / Purchase Order**. An authorized County representative will inspect all work assignments. The inspection shall be performed to determine acceptance of work, appropriate invoicing and warranty conditions. If the work is determined to not meet the specifications and requirements, the item shall be returned, at the Submitter's expense, to the Submitter. At the County's own option, the Submitter shall either provide a direct replacement for the item, or provide a full credit for the returned item. The Submitter shall not assess any additional charge(s) for any conforming action taken by the County under this clause.

**2.9 MIAMI-DADE HOUSING (MDHA) EXEMPTION TO CERTAIN CLAUSES**

The contract to be awarded under this solicitation will be accessed by the Miami-Dade Housing Authority (MDHA). As a Federally-funded agency, certain clauses within this solicitation do not apply to that Department's allocation:

Section 1 Paragraph 1.10 (Local Preferences), Section 1 Paragraph 1.27 (Office of the Inspector General), Section 1 Paragraph 1.43 (Small Business Contract Measures), and Section 1 Paragraph 1.35 (County User Access Program - UAP).

**2.10 INSURANCE REQUIREMENT**

The insurance requirement show in Section 1.0, paragraph 1.21 does not apply to Group 1 of this RTQ.

**2.11 SHANNON MELENDI AFFIDAVIT**

Submitters are required to complete this affidavit pursuant to Miami-Dade County Code Chapter 26, Article III; The Shannon Melendi Act. A copy of the Ordinance may be obtained online at: <http://intra.miamidade.gov/gia/legistarfiles/Matters/Y2008/080439.pdf>. A copy of the code may be obtained online at: <http://library.municode.com/index.aspx?clientId=10620>.

**2.12 DEFINITIONS**

- A. **Submittal** – shall refer to the form submitted in response to this Request to Qualify.
- B. **Submitter** – shall refer to anyone responding to this Request to Qualify.

**SECTION 3**  
**TECHNICAL SPECIFICATIONS**

**Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ**

**3.1 SCOPE OF WORK**

This Request to Qualify is intended to establish two Groups of Pre-Qualified Vendors to purchase lawn equipment, original equipment manufacturer (OEM) replacement parts and repair services for Miami-Dade County.

**3.2** Lawn equipment includes but not limited to the following:

- a. Mowers
- b. Tractors
- c. Edgers
- d. Trimmers
- e. Chain Saws
- f. Weed Eaters
- g. Blowers
- h. Leaf Sweepers

**3.3** Repairs to lawn equipment includes but not limited to the following:

- a. Mechanical
- b. Painting
- c. Welding

Services may be rendered at a County Site (field) or at the Vendor's facility (in-shop). The County will determine with each order where services will be rendered. It is the Vendor's responsibility to pick-up the equipment from the County and deliver it within the timeframe specified in the **Work Order** or **Purchase Order**.

**SECTION 4**  
**RTQ SUBMITTAL FORM**

**Submit Bid To:**  
**CLERK OF THE BOARD**  
**Stephen P. Clark Center**  
**111 NW 1<sup>st</sup> Street**  
**17<sup>th</sup> Floor, Suite 202**  
**Miami, Florida 33128-1983**

**INITIAL OPENING: 2:00 P.M.**  
**Wednesday**  
**August 7, 2013**



**PLEASE QUOTE PRICES F.O.B. DESTINATION, FREIGHT ALLOWED, LESS TAXES,  
 DELIVERED IN MIAMI-DADE COUNTY, FLORIDA.**

NOTE: Miami-Dade County is exempt from all taxes (Federal, State, Local). Bid price should be less all taxes. Tax Exemption Certificate furnished upon request.

Issued  
by: **LB**

ISD/PM

Date Issued:  
**July 24, 2013**

This Submittal Consists of  
Pages **5** through **13**

Sealed Submittals are subject to the Terms and Conditions of this Request to Qualify and the accompanying Submittal. Such other contract provisions, specifications, drawings or other data as are attached or incorporated by reference in the Submittal, will be received at the office of the Clerk of the Board at the address shown above until the above stated time and date, and at that time, publicly opened for furnishing the supplies or services described in the accompanying Submittal Requirement.

**Title:**

**Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ**

A Bid Deposit in the amount of **NA** the total amount of the bid shall accompany all bids.

A Performance Bond in the amount of **NA** the total amount of the bid will be required upon execution of the contract by the successful Submitter and Miami-Dade County.

<b>DO NOT WRITE IN THIS SPACE</b>	
ACCEPTED _____	HIGHER THAN LOW _____
NON-RESPONSIVE _____	NON-RESPONSIBLE _____
DATE B.C.C. _____	NO BID _____
ITEM NOS. ACCEPTED _____	
COMMODITY CODE: <b>515-00, 515-15</b>	
Procurement Contracting Officer: <b>Lina Bonilla</b>	

FIRM NAME \_\_\_\_\_

**RETURN ONE ORIGINAL AND TWO COPIES OF SUBMITTAL PAGES AND AFFIDAVITS.**



**SECTION 4**  
**RTQ SUBMITTAL FOR:**  
**Lawn Equipment, OEM Replacement Parts and Repair Services**

**FIRM NAME:** \_\_\_\_\_

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<b>Group 1: Purchase of Lawn Equipment and / or OEM Replacement Parts</b>	
Client Reference No. 1	Company Name: _____  Contact Person's Name: _____  Company Telephone No.: _____  Company Email Address: _____
Client Reference No. 2	Company Name: _____  Contact Person's Name: _____  Company Telephone No.: _____  Company Email Address: _____
Client Reference No. 3	Company Name: _____  Contact Person's Name: _____  Company Telephone No.: _____  Company Email Address: _____

**SECTION 4**  
**RTQ SUBMITTAL FOR:**  
**Lawn Equipment, OEM Replacement Parts and Repair Services**

**FIRM NAME:** \_\_\_\_\_

<b>Group 2: Lawn Equipment Repair Services</b>	
Client Reference No. 1	Company Name: _____ Contact Person's Name: _____ Company Telephone No.: _____ Company Email Address: _____
Client Reference No. 2	Company Name: _____ Contact Person's Name: _____ Company Telephone No.: _____ Company Email Address: _____
Client Reference No. 3	Company Name: _____ Contact Person's Name: _____ Company Telephone No.: _____ Company Email Address: _____

**Group 1 and 2** Submitters shall submit proof that they or their supplier can provide lawn equipment and / or OEM replacement parts to meet the needs of Miami-Dade County. The proof may be in the form of current correspondence from the manufacturer; or a copy of the signed agreement between the manufacturer and the Submitter, a reseller agreement; or a reference on the manufacturer's website.

Manufacturer Line	Proof provided	New Lawn Equipment	OEM Replacement Parts

**SECTION 4**  
**RTQ SUBMITTAL FOR:**  
**Lawn Equipment, OEM Replacement Parts and Repair Services**

**ACKNOWLEDGEMENT OF ADDENDA**

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**INSTRUCTIONS: COMPLETE PART I OR PART II, WHICHEVER APPLIES**

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**PART I:**

LIST BELOW THE DATES OF ISSUE FOR EACH ADDENDUM RECEIVED IN CONNECTION  
WITH THIS BID

Addendum #1, Dated \_\_\_\_\_

Addendum #2, Dated \_\_\_\_\_

Addendum #3, Dated \_\_\_\_\_

Addendum #4, Dated \_\_\_\_\_

Addendum #5, Dated \_\_\_\_\_

Addendum #6, Dated \_\_\_\_\_

Addendum #7, Dated \_\_\_\_\_

Addendum #8, Dated \_\_\_\_\_

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**PART II:**

☐ NO ADDENDUM WAS RECEIVED IN CONNECTION WITH THIS BID

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**FIRM NAME:** \_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**TITLE OF OFFICER:** \_\_\_\_\_

**Bid Title:** Lawn Equipment, OEM Replacement Parts and Repair Services, RTQ

By signing this Submittal Form the Submitter certifies that it satisfies all legal requirements (as an entity) to do business with the County, including all Conflict of Interest and Code of Ethics provisions in Section 2-11 of the Miami-Dade County Code. Any County employee or member of his or her immediate family seeking to contract with the County shall seek a conflict of interest opinion from the Miami-Dade County Ethics Commission prior to submittal of a Bid response or application of any type to contract with the County by the employee or his or her immediate family and file a copy of that request for opinion and any opinion or waiver from the Board of County Commissioners with the Clerk of the Board. The affected employee shall file with the Clerk of the Board a statement in a form satisfactory to the Clerk disclosing the employee's interest or the interest of his or her immediate family in the proposed contract and the nature of the intended contract at the same time as or before submitting a Bid, response, or application of any type to contract with the County. Also a copy of the request for a conflict of interest opinion from the Ethics Commission and any corresponding opinion, or any waiver issued by the Board of County Commissioners, must be submitted with the response to the solicitation.

In accordance with Sec. 2-11.1(s) of the County Code as amended, prior to conducting any lobbying **regarding this solicitation, the Submitter must file the appropriate form with the Clerk of the Board stating that a particular lobbyist is authorized to represent the Submitter.** Failure to file the appropriate form in relation to each solicitation may be considered as evidence that the Submitter is not a responsible contractor.

The Submitters confirms that this Request to Qualify is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a Submittal for the same goods and/or services and in all respects is without collusion, and that the Submitter will accept any resultant award. Further, the undersigned acknowledges that award of a contract is contingent upon vendor registration. Failure to register as a vendor within the specified time may result in your firm not being considered for award.

Pursuant to Miami-Dade County Ordinance 94-34, any individual, corporation, partnership, joint venture or other legal entity having an officer, director, or executive who has been convicted of a felony during the past ten (10) years shall disclose this information at the time of Submittal or proposal submission.

☐ Place a check mark here **only** if Submitter has such conviction to disclose.

By executing this proposal through a duly authorized representative, the proposer certifies that the proposer is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, as those terms are used and defined in sections 287.135 and 215.473 of the Florida Statutes. In the event that the proposer is unable to provide such certification but still seeks to be considered for award of this solicitation, the proposer shall execute the proposal through a duly authorized representative and shall also initial this space: \_\_\_\_\_. In such event, the proposer shall furnish together with its proposal a duly executed written explanation of the facts supporting any exception to the requirement for certification that it claims under Section 287.135 of the Florida Statutes. The proposer agrees to cooperate fully with the County in any investigation undertaken by the County to determine whether the claimed exception would be applicable. The County shall have the right to terminate any contract resulting from this solicitation for default if the proposer is found to have submitted a false certification or to have been placed on the Scrutinized Companies for Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

**LOCAL PREFERENCE CERTIFICATION:** For the purpose of this certification, a "local business" is a business located within the limits of Miami-Dade County (or Broward County in accordance with the Interlocal Agreement between the two counties) that conforms with the provisions of Section 1.10 of the General Terms and Conditions of this solicitation and contributes to the economic development of the community in a verifiable and measurable way. This may include, but not be limited to, the retention and expansion of employment opportunities and the support and increase to the County's tax base.

☐ Place a check mark here **only** if affirming Submitter meets requirements for Local Preference. Failure to complete this certification at this time (by checking the box above) may render the vendor ineligible for Local Preference.

**LOCALLY-HEADQUARTERED BUSINESS CERTIFICATION:** For the purpose of this certification, a "locally-headquartered business" is a Local Business whose "principal place of business" is in Miami-Dade County, as defined in Section 1.10 of the General Terms and Conditions of this solicitation.

☐ Place a check mark here **only** if affirming Submitter meets requirements for the Locally-Headquartered Preference (LHP). Failure to complete this certification at this time (by checking the box above) may render the vendor ineligible for the LHP. The address of the locally-headquartered office is \_\_\_\_\_.



**LOCAL CERTIFIED SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE CERTIFICATION:** A Local Certified Service-Disabled Veteran Business Enterprise is a firm that is (a) a local business pursuant to Section 2-8.5 of the Code of Miami-Dade County and (b) prior to Submittal submission is certified by the State of Florida Department of Management Services as a service-disabled veteran business enterprise pursuant to Section 295.187 of the Florida Statutes.

☐ Place a check mark here only if affirming Submitter is a Local Certified Service-Disabled Veteran Business Enterprise. A copy of the certification must be submitted with this proposal.

**COUNTY USER ACCESS PROGRAM (UAP): Joint purchase and entity revenue sharing program**

For the County's information, the Submitter is requested to indicate, at 'A' and 'B' below, its general interest in participating in the Joint Purchase Program of the County User Access Program (UAP) described in Section 1.35 of this contract solicitation, if that section is present in this solicitation document. Submitters participation in the Joint Purchase portion of the UAP is **voluntary**, and the Submitter's expression of general interest at 'A' and 'B' below is for the County's information only and **shall not be binding** on the Submitter.

- A. If awarded this County contract, would you be interest in participating in the Joint Purchase portion of the UAP with respect to other governmental, quasi-governmental or not-for-profit entities located **within** the geographical boundaries of Miami-Dade County?

Yes \_\_\_\_\_ No \_\_\_\_\_

- B. If awarded this County contract, would you be interested in participating in the Joint Purchase portion of the UAP with respect to other governmental, quasi-governmental or not-for-profit entities located **outside** the geographical boundaries of Miami-Dade County?

Yes \_\_\_\_\_ No \_\_\_\_\_

Firm Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ FEIN No. \_\_\_\_-\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

Prompt Payment Terms: \_\_\_\_% \_\_\_\_ days net \_\_\_\_ days (Please see paragraph 1.2 H of General Terms and Conditions)

Signature: \_\_\_\_\_ (Signature of authorized agent)

***“By signing this document the Submitter agrees to all Terms and Conditions of this Solicitation and the resulting Contract.”***

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED ABOVE BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE PROPOSAL NON-RESPONSIVE. THE COUNTY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE PROPOSER TO THE TERMS OF ITS OFFER.**



**MIAMI-DADE PARKS, RECREATION AND OPEN SPACES DEPARTMENT AFFIDAVIT  
PURSUANT TO MIAMI-DADE COUNTY CODE CHAPTER 26, ARTICLE III; THE SHANNON MELENDI ACT**

1. This affidavit is submitted to the Miami-Dade County Parks, Recreation and Open Spaces Department, (the "Department") by: \_\_\_\_\_, for  
(Print individual's name and title)  
\_\_\_\_\_  
(Print name of entity submitting compliance statement)  
whose business address is \_\_\_\_\_  
and its Federal Employer Identification Number (FEIN/SSN) \_\_\_\_\_
2. I, am duly authorized to make this affidavit on behalf of:  
\_\_\_\_\_  
(Print individual's name and title) \_\_\_\_\_  
(Print name of entity submitting affidavit)
3. I understand that on January 10, 2008, the Miami-Dade County Commission passed and adopted Ordinance No. 08-07, which amended Miami-Dade County Code, Chapter 26, Article III, and the Shannon Melendi Act.
4. I understand and can attest to the my organization/agency/firm's compliance with this Ordinance and that;
  - A. Employers of child event workers, employers of park vendors, Programming Partners and CBOs shall secure a nationwide criminal background check of all existing child event workers, park vendors, employees, and volunteers whose duties require physical presence on park property owned or operated by Miami-Dade County. In addition, prior to employing or allowing to volunteer a person whose duties would require physical presence on park property owned or operated by Miami-Dade County, employers of child event workers, employers of park vendors, and Programming Partners and CBOs shall secure a nationwide criminal background check of all such prospective child event workers, park vendors, employees or volunteers. My organization/agency/firm has conducted the nationwide criminal background checks through a **Professional Background Screener** and has obtained a report as to whether each child event worker, park vendor, staff member or volunteer is listed on the **National Sex Offender Public Registry**, and a comprehensive report and analysis, obtained from no less than **two independent databases/sources**, on the nationwide criminal history of such child event worker, park vendor, staff member or volunteer.
  - B. Every three (3) years thereafter, employers of park vendors, and Programming Partners and CBOs shall secure nationwide criminal background checks for existing park vendors, staff members, and volunteers whose duties require physical presence on park property owned or operated by Miami-Dade County. However, employers of child event workers shall secure nationwide criminal background checks for existing child event workers whose duties require physical presence on park property owned or operated by Miami-Dade County every year thereafter.
  - C. Any child event worker, park vendor, or staff member or volunteer of a Programming Partner or CBO who:
    1. Has been convicted of a violent felony or conspiracy to commit a violent felony within the past five (5) years; or
    2. Has been convicted of a felony involving the trafficking of a controlled substance within the past (5) years; or
    3. Has two (2) or more convictions for a violent felony, for conspiracy to commit a violent felony, or involving the trafficking of a controlled substance; or
    4. Is a sexual offender or a sexual predator; or
    5. Has failed to provide the employer, Programming Partner or CBO with proof of United States citizenship or legal immigration status in the United States, shall be prohibited from working or volunteering on park property owned or operated by Miami-Dade County. All child event workers, park vendors, and staff members and volunteers of a Programming Partner or CBO shall submit to their employer, to the Programming Partner, or to the CBO an affidavit affirming that no work or volunteer duties will be performed on park property owned or operated by Miami-Dade County in violation of this subsection and that any arrest will be reported to his/her employer within forty-eight (48) hours of such arrest.
  - D. Employers of child event workers shall maintain copies of the results of the criminal background checks required by this section for a period of two (2) years from the date they were secured, and employers of park vendors, Programming Partners, and CBOs shall maintain such copies for a period of three (3) years from the date they were secured. Employers of child event workers, employers of park vendors, and Programming Partners and CBOs shall maintain the affidavits required by Section 26-38.C. and the copies of the proof of United States citizenship or legal immigration status until the person is no longer a child event worker, park vendor, staff member, or volunteer. Employers of child event workers, employers of park vendors, and Programming Partners and CBOs



shall, upon request, provide copies of these documents to Miami-Dade County or to any law enforcement personnel with jurisdiction.

- E. Every child event worker, park vendor, and staff member and volunteer of a Programming Partner or CBO shall wear, in a conspicuous and visible manner, an **identification badge that contains his/her photograph and full name** while working or volunteering on park property owned or operated by Miami-Dade County, except when in costume and during a performance. The identification badge shall be of a size, design, and format approved by the Miami-Dade Parks, Recreation and Open Spaces Department.
5. I understand that the following Penalties and Enforcement shall take place for a violation of any provision of the ordinance.
  - a. It shall be unlawful for an employer of child event workers, an employer of park vendors, or a Programming Partner or CBO to knowingly permit or allow any child event worker, park vendor, staff member, or volunteer to work or volunteer on park property owned or operated by Miami-Dade County in violation of Section 26-38.
  - b. It shall be unlawful for any child event worker, park vendor, or staff member or volunteer of a Programming Partner or CBO to work or volunteer on park property owned or operated by Miami-Dade County in violation of Section 26-38.
  - c. Any person who shall violate a provision of Section 26-38, or who shall knowingly or willingly provide false or erroneous information to his/her employer, or fail to comply therewith, or with any of the requirements thereof, shall upon conviction thereof in the County Court, be punished by a fine not to exceed five hundred dollars (\$500.00) or by imprisonment in the County Jail for not more than sixty (60) days, or by both such fine and imprisonment.
  - d. Any person who violates or fails to comply with Section 26-38 may be subject to civil penalties in accordance with Chapter 8CC of this Code. Each day of violation or noncompliance shall constitute a separate offense.
6. I understand that any costs or fees associated with the required background screening will be borne by my organization/agency/firm.
7. I hereby certify that the foregoing statement is true and correct in relation to the company for which I am submitting this affidavit. I further certify that this statement is being given knowingly and voluntarily by me on behalf of the company.

The organization/agency/firm submitting this affidavit recognizes and acknowledges that it's subject to the provisions of Code of Miami-Dade County, Chapter 26, Article III, the Shannon Melendi Act and agrees to comply therewith.

\_\_\_\_\_ (Signature)  
 \_\_\_\_\_  
 Date Title

SUBSCRIBED AND SWORN TO (or affirmed) before me this \_\_\_\_\_

by \_\_\_\_\_ He/She is personally known to me or has

presented \_\_\_\_\_ as identification.

(Type of Identification)

\_\_\_\_\_  
 (Signature of Notary)

\_\_\_\_\_  
 (Serial Number)

\_\_\_\_\_  
 (Print or Stamp Name of Notary)

\_\_\_\_\_  
 (Expiration Date)

Notary Public \_\_\_\_\_ Notary Seal  
 (State)



# **APPENDIX**

## **AFFIDAVITS** **FORMAL BIDS**





Contract No. : \_\_\_\_\_ Federal Employer  
Identification Number (FEIN): \_\_\_\_\_

Contract Title: \_\_\_\_\_

1.	<b>Miami-Dade County Ownership Disclosure</b> Sec. 2-8.1 of the County Code	6.	<b>Miami-Dade County Vendor Obligation to County</b> Section 2-8.1 of the County Code
2.	<b>Miami-Dade County Employment Disclosure</b> County Ordinance No. 90-133, amending Section 2-8-1(d)(2) of the County Code	7.	<b>Miami-Dade County Code of Business Ethics</b> Article 1, Section 2-8.1(i) and 2-11(b)(1) of the County Code through (6) and (9) of the County Code and County Ordinance No 00-1 amending Section 2-11.1(c) of the County Code
3.	<b>Miami-Dade County Employment Drug-free Workplace Certification</b> Section 2-8.1.2(b) f the County Code	8.	<b>Miami-Dade County Family Leave</b> Article V of Chapter 11 of the County Code
4.	<b>Miami-Dade County Disability Non-Discrimination</b> Article 1, Section 2-8.1.5 Resolution R182-00 amending R-385-95	9.	<b>Miami-Dade County Living Wage</b> Section 2-8.9 of the County Code
5.	<b>Miami-Dade County Debarment Disclosure</b> Section 10.38 of the County Code	10.	<b>Miami-Dade County Domestic Leave and Reporting</b> Article 8, Section 11A-60 11A-67 of the County Code

Printed Name of Affiant	Printed Title of Affiant	Signature of Affiant
Name of Firm		Date
Address of Firm	State	Zip Code

Notary Public – State of \_\_\_\_\_ County of \_\_\_\_\_

**Subscribed and sworn to** (or affirmed) before me this \_\_\_\_\_ day of, \_\_\_\_\_, 20\_\_\_\_.

by \_\_\_\_\_ He or she is personally known to me ☐ or has produced identification ☐

Type of identification produced \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Serial Number

\_\_\_\_\_  
 Print or Stamp of Notary Public                      Expiration Date                      Notary Public Seal

# FAIR SUBCONTRACTING PRACTICES

## (Ordinance 97-35)

**In compliance with Miami-Dade County Ordinance 97-35, the Bidder shall submit with the bid proposal a detailed statement of its policies and procedures (use separate sheet if necessary) for awarding subcontractors in accordance with Section 1, Paragraph 1.15**

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

☐ NO SUBCONTRACTORS WILL BE UTILIZED FOR THIS CONTRACT

Signature

Date \_\_\_\_\_

**SUBCONTRACTOR/SUPPLIER LISTING**  
**(Miami-Dade County Code Sections 2-8.1, 2-8.8 and 10-34)**

Firm Name of Prime Contractor/Respondent \_\_\_\_\_ FEIN # \_\_\_\_\_  
 Project/Contract Number \_\_\_\_\_

In accordance with Sections 2-8.1, 2-8.8 and 10.34 of the Miami-Dade County Code, this form must be submitted as a condition of award by all bidders/respondents on County contracts for purchase of supplies, materials or services, including professional services which involve expenditures of \$100,000 or more, and all bidders/respondents on County or Public Health Trust construction contracts which involve expenditures of \$100,000 or more. The bidder/respondent who is awarded this bid/contract shall not change or substitute first tier subcontractors or direct suppliers or the portions of the contract work to be performed or materials to be supplied from those identified, except upon written approval of the County. The bidder/respondent should enter the word "NONE" under the appropriate heading of this form if no subcontractors or suppliers will be used on the contract.

In accordance with Ordinance No. 11-90, an entity contracting with the County shall report the race, gender and ethnic origin of the owners and employees of all first tier subcontractors/suppliers. In the event that the successful bidder demonstrates to the County prior to award that the race, gender, and ethnic information is not reasonably available at that time, the successful bidder shall be obligated to exercise diligent efforts to obtain that information and provide the same to the County not later than ten (10) days after it becomes available and, in any event, prior to final payment under the contract.  
 (Please duplicate this form if additional space is needed.)

Business Name and Address of First Tier Subcontractor/ Subconsultant	Principal Owner	Scope of Work to be Performed by Subcontractor/ Subconsultant	Principal Owner (Enter the number of male and female owners by race/ethnicity)								Employee(s) (Enter the number of male and female employees and the number of employees by race/ethnicity)								
			Gender		Race/Ethnicity						Gender		Race/Ethnicity						
			M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/Native Alaskan	Other	M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/Native Alaskan	Other	
Business Name and Address of First Tier Direct Supplier	Principal Owner	Supplies/Materials/ Services to be Provided by Supplier	Principal Owner (Enter the number of male and female owners by race/ethnicity)								Employee(s) (Enter the number of male and female employees and the number of employees by race/ethnicity)								
			Gender		Race/Ethnicity						Gender		Race/Ethnicity						
			M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/Native Alaskan	Other	M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/Native Alaskan	Other	

☐ Mark here if race, gender and ethnicity information is not available and will be provided at a later date. This data may be submitted to Contracting/User department or on-line to the Small Business Development Division of the Regulatory and Economic Resources Department at <http://new.miamidade.gov/business/business-development.asp>.

I certify that the representations contained in this Subcontractor/Supplier listing are to the best of my knowledge true and accurate.

Signature of Bidder/Respondent \_\_\_\_\_

Print Name \_\_\_\_\_

Print Title \_\_\_\_\_

Date \_\_\_\_\_